

Fill in this information to identify the case:

United States Bankruptcy Court for the:

SOUTHERN DISTRICT OF TEXASCase number (if known): _____ Chapter 11☐ Check if this is an amended filingOfficial Form 201**Voluntary Petition for Non-Individuals Filing for Bankruptcy**

04/20

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, Instructions for Bankruptcy Forms for Non-Individuals, is available.

1. Debtor's name Riba Foods, Inc.
2. All other names debtor used in the last 8 years aka Riba Foods

Include any assumed names, trade names and *doing business as* names
3. Debtor's federal Employer Identification Number (EIN) 7 6 - 0 2 3 9 1 2 9
4. Debtor's address

| | |
|---|--|
| Principal place of business <u>3701 Arc Street</u> Number Street <u>Houston TX 77063</u> City State ZIP Code <u>Harris</u> County | Mailing address, if different from principal place of business _____ Number Street _____ P.O. Box _____ _____ City State ZIP Code Location of principal assets, if different from principal place of business <u>Multiple warehouses 3735 Arc;</u> Number Street <u>3806-3814 Ace; 3702-3724 Artdale</u> _____ <u>Houston TX 77063</u> City State ZIP Code |
|---|--|
5. Debtor's website (URL) Ribafoods.com
6. Type of debtor

| | |
|-------------------------------------|---|
| <input checked="" type="checkbox"/> | Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP)) |
| <input type="checkbox"/> | Partnership (excluding LLP) |
| <input type="checkbox"/> | Other. Specify: _____ |

Debtor Riba Foods, Inc.

Case number (if known) _____

7. Describe debtor's business

A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Railroad (as defined in 11 U.S.C. § 101(44))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
☒ None of the above

B. Check all that apply:

- ☐ Tax-exempt entity (as described in 26 U.S.C. § 501)
☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)
☐ Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>

2 0 3 3

8. Under which chapter of the Bankruptcy Code is the debtor filing?

Check one:

- ☐ Chapter 7
☐ Chapter 9
☒ Chapter 11. Check all that apply:

A debtor who is a "small business debtor" must check the first sub-box. A debtor as defined in § 1182(1) who elects to proceed under subchapter V of chapter 11 (whether or not the debtor is a "small business debtor") must check the second sub-box.

- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,725,625. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
☐ The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, AND IT CHOOSES TO PROCEED UNDER SUBCHAPTER V OF CHAPTER 11. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
☐ A plan is being filed with this petition.
☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy Under Chapter 11 (Official Form 201A) with this form.
☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12

Debtor Riba Foods, Inc.

Case number (if known) _____

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

☒ No

☐ Yes. District _____ When _____ Case number _____
MM / DD / YYYY

District _____ When _____ Case number _____
MM / DD / YYYY

District _____ When _____ Case number _____
MM / DD / YYYY

If more than 2 cases, attach a separate list.

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

☒ No

☐ Yes. Debtor _____ Relationship _____

District _____ When _____
MM / DD / YYYY

Case number, if known _____

Debtor _____ Relationship _____

District _____ When _____
MM / DD / YYYY

Case number, if known _____

List all cases. If more than 1, attach a separate list.

11. Why is the case filed in this district?

Check all that apply:

☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.

☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

Debtor Riba Foods, Inc.

Case number (if known) _____

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

☐ No

☒ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard? _____

☐ It needs to be physically secured or protected from the weather.

☒ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

☐ Other _____

Where is the property? 3702-3724 Artdale, 3735-3737 Arc

Number Street

3701-3703 Arc

Houston

City

TX

State

77063

ZIP Code

Is the property insured?

☐ No

☒ Yes. Insurance agency Travelers Insurance

Contact name Michael Hotchkiss - Hotchkiss Ins Agency

Phone 713-292-5719

Statistical and administrative information

13. Debtor's estimation of available funds

Check one:

☒ Funds will be available for distribution to unsecured creditors.

☐ After any administrative expenses are paid, no funds will be available for distribution to unsecured creditors.

14. Estimated number of creditors

☐ 1-49

☐ 50-99

☒ 100-199

☐ 200-999

☐ 1,000-5,000

☐ 5,001-10,000

☐ 10,001-25,000

☐ 25,001-50,000

☐ 50,001-100,000

☐ More than 100,000

15. Estimated assets

☐ \$0-\$50,000

☐ \$50,001-\$100,000

☐ \$100,001-\$500,000

☐ \$500,001-\$1 million

☒ \$1,000,001-\$10 million

☐ \$10,000,001-\$50 million

☐ \$50,000,001-\$100 million

☐ \$100,000,001-\$500 million

☐ \$500,000,001-\$1 billion

☐ \$1,000,000,001-\$10 billion

☐ \$10,000,000,001-\$50 billion

☐ More than \$50 billion

16. Estimated liabilities

☐ \$0-\$50,000

☐ \$50,001-\$100,000

☐ \$100,001-\$500,000

☐ \$500,001-\$1 million

☒ \$1,000,001-\$10 million

☐ \$10,000,001-\$50 million

☐ \$50,000,001-\$100 million

☐ \$100,000,001-\$500 million

☐ \$500,000,001-\$1 billion

☐ \$1,000,000,001-\$10 billion

☐ \$10,000,000,001-\$50 billion

☐ More than \$50 billion

Debtor Riba Foods, Inc.

Case number (if known) _____

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature of
authorized representative
of debtor**

- ☒ The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.
- ☒ I have been authorized to file this petition on behalf of the debtor.
- ☒ I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 06/20/2023

MM / DD / YYYY

X /s/ Miguel A. Barrios

Signature of authorized representative of debtor

Miguel A. Barrios

Printed name

CEO

Title

18. Signature of attorney

X /s/ Richard Lee Fuqua II

Signature of attorney for debtor

Date 06/20/2023

MM / DD / YYYY

Richard Lee Fuqua II

Printed name

Fuqua & Associates, P.C.

Firm name

8558 Katy Freeway

Number Street

Suite 119

Houston

City

TX

State

77024

ZIP Code

(713) 960-0277

Contact phone

RLFuqua@FuquaLegal.com

Email address

07552300

Bar number

TX

State

STATEMENT REGARDING AUTHORITY TO SIGN AND FILE PETITION

I, Miguel Barrios, declare under penalty of perjury that I am the Chief Executive Officer of Riba Foods, Inc., a Texas for-profit corporation and that on June 14, 2023, the following resolution was duly adopted by the partners of this corporation:

“Whereas, it is in the best interest of this corporation to file a voluntary petition in the United States Bankruptcy Court pursuant to Chapter 11 of Title 11 of the United States Code;

Be it Therefore Resolved, that Miguel Barrios, the Chief Executive Officer of the corporation, is authorized and directed to execute and deliver all documents necessary to perfect the filing of a Chapter 11 voluntary bankruptcy case on behalf of the corporation; and

Be it Further Resolved, that Miguel Barrios, the Chief Executive Officer of Riba Foods, Inc., is authorized and directed to appear in all bankruptcy proceedings on behalf of the corporation, and to otherwise do and perform all acts and deeds and to execute and deliver all necessary documents on behalf of the corporation in connection with such bankruptcy case; and

Be it Further Resolved, that Miguel Barrios, the Chief Executive Officer of Riba Foods, Inc., is authorized and directed to employ Richard L. Fuqua, attorney and the law firm of Fuqua & Associates, PC to represent the corporation in such bankruptcy case.”

Executed on: June 14, 2023

Signed:

RIBA FOODS, INC.

By:

Name:

Title:

Miguel Barrios

Chief Executive Officer

Fill in this information to identify the caseDebtor name Riba Foods, Inc.United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXASCase number
(if known) _____☐ Check if this is an amended filingOfficial Form 206A/B**Schedule A/B: Assets -- Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- ☐ No. Go to Part 2.
☒ Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of
debtor's interest

2. Cash on hand

3. Checking, savings, money market, or financial brokerage accounts (*Identify all*)

| Name of institution (bank or brokerage firm) | Type of account | Last 4 digits of account number | |
|--|------------------|---------------------------------|--------------|
| 3.1. Comerica Bank Checking account xxx0583 | Checking account | 0 5 8 3 | \$64,395.48 |
| 3.2. Gulf Coast Reserve Account | Savings account | | \$472,243.75 |

4. Other cash equivalents (*Identify all*)

Name of institution (bank or brokerage firm)

5. Total of Part 1

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$536,639.23**Part 2: Deposits and prepayments**

6. Does the debtor have any deposits or prepayments?

- ☐ No. Go to Part 3.
☒ Yes. Fill in the information below.

Debtor Riba Foods, Inc. Case number (if known) _____
Name

Current value of
debtor's interest

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit

7.1. Kagan Realty Investors \$31,810.00

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment

8.1. Utilities \$1,000.00

9. Total of Part 2.

Add lines 7 through 8. Copy the total to line 81.

\$32,810.00

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

- ☐ No. Go to Part 4.
☒ Yes. Fill in the information below.

Current value of
debtor's interest

11. Accounts receivable

11a. 90 days old or less: \$351,478.00 — \$0.00 = → \$351,478.00
face amount doubtful or uncollectible accounts

11b. Over 90 days old: \$3,181,419.00 — \$2,418,703.00 = → \$762,716.00
face amount doubtful or uncollectible accounts

12. Total of Part 3

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$1,114,194.00

Part 4: Investments

13. Does the debtor own any investments?

- ☐ No. Go to Part 5.
☒ Yes. Fill in the information below.

Valuation method
used for current value

Current value of
debtor's interest

14. Mutual funds or publicly traded stocks not included in Part 1

Name of fund or stock:

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of entity: _____ % of ownership: _____

15.1. Hill Country Foodworks Preferred Shares Book \$580,508.00

16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

17. Total of Part 4

Add lines 14 through 16. Copy the total to line 83.

\$580,508.00

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☐ No. Go to Part 6.
☒ Yes. Fill in the information below.

Debtor Riba Foods, Inc. Case number (if known) _____

Name

| General description | Date of the last physical inventory MM/DD/YYYY | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|--|---|--|---|------------------------------------|
| 19. Raw materials | | | | |
| Raw materials | 06/10/2023 | \$1,606,466.00 | Est. of liquidation value | \$230,000.00 |
| 20. Work in progress | | | | |
| 21. Finished goods, including goods held for resale | | | | |
| Finished goods, including goods held for resale | 06/10/2023 | \$385,195.00 | Est. of liquidation value | \$192,592.00 |
| Certain inventory was purchased within 20 days of filing | | \$15,000.00 | | \$0.00 |
| 22. Other inventory or supplies | | | | |
| Miscellaneous warehouse, kitchen and maintenance parts | | \$0.00 | | \$15,000.00 |
| 23. Total of Part 5 | | | | \$437,592.00 |
| Add lines 19 through 22. Copy the total to line 84. | | | | |

24. Is any of the property listed in Part 5 perishable?

- ☐ No
☒ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- ☐ No
☒ Yes. Book value \$15,000.00 Valuation method _____ Current value \$0.00

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming or fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.
☐ Yes. Fill in the information below.

| General description | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|---|--|---|------------------------------------|
| 28. Crops--either planted or harvested | | | |
| 29. Farm animals <i>Examples:</i> Livestock, poultry, farm-raised fish | | | |
| 30. Farm machinery and equipment (Other than titled motor vehicles) | | | |
| 31. Farm and fishing supplies, chemicals, and feed | | | |
| 32. Other farming and fishing-related property not already listed in Part 6 | | | |
| 33. Total of Part 6. | | | \$0.00 |
| Add lines 28 through 32. Copy the total to line 85. | | | |

34. Is the debtor a member of an agricultural cooperative?

- ☐ No
☐ Yes. Is any of the debtor's property stored at the cooperative?
☐ No
☐ Yes

Debtor Riba Foods, Inc. Case number (if known) _____
 Name

35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?

- ☐ No
☐ Yes. Book value _____ Valuation method _____ Current value _____

36. Is a depreciation schedule available for any of the property listed in Part 6?

- ☐ No
☐ Yes

37. Has any of the property listed in Part 6 been appraised by a professional within the last year?

- ☐ No
☐ Yes

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☐ No. Go to Part 8.
☒ Yes. Fill in the information below.

| General description | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|---|--|---|------------------------------------|
| 39. Office furniture | | | |
| Office furniture | \$0.00 | Est. Liquidation value | \$7,500.00 |
| 40. Office fixtures | | | |
| Office fixtures | | Est. liquidation value | \$1,500.00 |
| 41. Office equipment, including all computer equipment and communication systems equipment and software | | | |
| Office equipment | \$9,605.00 | Est. liquidation value | \$5,000.00 |
| 42. Collectibles <i>Examples:</i> Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles | | | |

43. Total of Part 7.

Add lines 39 through 42. Copy the total to line 86.

\$14,000.00

44. Is a depreciation schedule available for any of the property listed in Part 7?

- ☐ No
☒ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☐ No. Go to Part 9.
☒ Yes. Fill in the information below.

Debtor Riba Foods, Inc. Case number (if known) _____

Name

General descriptionInclude year, make, model, and identification numbers
(i.e., VIN, HIN, or N-number)**Net book value of
debtor's interest**
(Where available)**Valuation method
used for current value****Current value of
debtor's interest**

47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles

48. Watercraft, trailers, motors, and related accessories Examples: Boats
trailers, motors, floating homes, personal watercraft, and fishing vessels

49. Aircraft and accessories

50. Other machinery, fixtures, and equipment (excluding farm
machinery and equipment)Machinery and equipment \$1,634,447.00 Est. liquidation value \$300,000.00

51. Total of Part 8.

Add lines 47 through 50. Copy the total to line 87.

\$300,000.00

52. Is a depreciation schedule available for any of the property listed in Part 8?

- ☐
- No
-
- ☒
- Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☒
- No
-
- ☐
- Yes

Part 9: Real property

54. Does the debtor own or lease any real property?

- ☐
- No. Go to Part 10.
-
- ☒
- Yes. Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of propertyInclude street address or other description
such as Assessor Parcel Number (APN),
and type of property (for example,
acreage, factory, warehouse, apartment or
office building), if available.**Nature and extent
of debtor's interest
in property****Net book value of
debtor's interest**
(Where available)**Valuation method
used for current
value****Current value of
debtor's interest**55.1. **Kagan Realty Investors**
3735 Arc; 3802 Ace, 3814 Artdale
Houston, TexasImprovements Leasehold interest \$481,411.00 Est. liquidation val \$0.00

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$0.00

57. Is a depreciation schedule available for any of the property listed in Part 9?

- ☐
- No
-
- ☒
- Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

- ☒
- No
-
- ☐
- Yes

Debtor Riba Foods, Inc.
Name

Case number (if known) _____

Part 10: Intangibles and Intellectual Property

59. Does the debtor have any interests in intangibles or intellectual property?

- ☐ No. Go to Part 11.
☒ Yes. Fill in the information below.

| General description | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|--|--|---|------------------------------------|
| 60. Patents, copyrights, trademarks, and trade secrets | | | |
| Trade secrets and trademarks A+Brands - Arriba! Texas Pepper Works Comalera | \$0.00 | estimate | \$150.00 |
| 61. Internet domain names and websites | | | |
| Multiple internet domain names and websites | \$0.00 | | \$1,000.00 |
| 62. Licenses, franchises, and royalties | | | |
| 63. Customer lists, mailing lists, or other compilations | | | |
| Customer lists | Unknown | | \$0.00 |
| 64. Other intangibles, or intellectual property | | | |
| Other intangibles or intellectual property including recipes | \$0.00 | | \$0.00 |
| 65. Goodwill | | | |
| Goodwill - A+Brands - Arriba Brand, Texas Pepper Works, Comalera | \$0.00 | estimate | \$150,000.00 |
| 66. Total of Part 10. Add lines 60 through 65. Copy the total to line 89. | | | \$151,150.00 |

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- ☒ No
☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☒ No
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.
☒ Yes. Fill in the information below.

Debtor Riba Foods, Inc. Case number (if known) _____
 Name

Current value of
debtor's interest

71. Notes receivable

Description (include name of obligor)

Cookwell & Company \$100,000.00 – \$0.00 = → \$100,000.00
 Total face amount doubtful or uncollectible amount

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

IRS payroll tax refund for tax year 2021 Tax year 2020 \$398,400.00

73. Interests in insurance policies or annuities

74. Causes of action against third parties (whether or not a lawsuit has been filed)

75. Other contingent and unliquidated claims or causes of action of every nature,
including counterclaims of the debtor and rights to set off claims

76. Trusts, equitable or future interests in property

77. Other property of any kind not already listed *Examples: Season tickets, country club membership*

78. Total of Part 11.

Add lines 71 through 77. Copy the total to line 90.

\$498,400.00

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Debtor Riba Foods, Inc.
Name

Case number (if known) _____

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

| Type of property | Current value of personal property | Current value of real property |
|--|---------------------------------------|-----------------------------------|
| 80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1.</i> | <u>\$536,639.23</u> | |
| 81. Deposits and prepayments. <i>Copy line 9, Part 2.</i> | <u>\$32,810.00</u> | |
| 82. Accounts receivable. <i>Copy line 12, Part 3.</i> | <u>\$1,114,194.00</u> | |
| 83. Investments. <i>Copy line 17, Part 4.</i> | <u>\$580,508.00</u> | |
| 84. Inventory. <i>Copy line 23, Part 5.</i> | <u>\$437,592.00</u> | |
| 85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i> | <u>\$0.00</u> | |
| 86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i> | <u>\$14,000.00</u> | |
| 87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i> | <u>\$300,000.00</u> | |
| 88. Real property. <i>Copy line 56, Part 9.</i> → | | <u>\$0.00</u> |
| 89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i> | <u>\$151,150.00</u> | |
| 90. All other assets. <i>Copy line 78, Part 11.</i> | <u>+ \$498,400.00</u> | |
| 91. Total. Add lines 80 through 90 for each column. 91a. | <u>\$3,665,293.23</u> | 91b. <u>\$0.00</u> |
| 92. Total of all property on Schedule A/B. Lines 91a + 91b = 92..... | | <u>\$3,665,293.23</u> |

Fill in this information to identify the case:

Debtor name Riba Foods, Inc.

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXAS

Case number _____
(if known)

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims**2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.**

| Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim |
|--|--|
|--|--|

| | | | | |
|------------|--|--|--------------------|---------------------|
| 2.1 | Creditor's name <u>Alvarados Mexican Produce</u> | Describe debtor's property that is subject to a lien <u>PACA Trust Funds</u> | <u>\$74,950.00</u> | <u>\$894,835.75</u> |
| | Creditor's mailing address <u>a PACA Trust Fund Acct</u> | Describe the lien <u>PACA Trust Funds</u> | | |
| | <u>2305 Airline Drive</u> | | | |
| | <u>Houston TX 77009</u> | Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | |
| | Creditor's email address, if known _____ | Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) | | |
| | Date debt was incurred <u>3/2/2023 - 3/9/20</u> | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | | |
| | Last 4 digits of account number _____ | | | |
| | Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor, and its relative priority. | | | |

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.\$5,266,554.87

| Column A | Column B |
|--|--|
| Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim |

| | |
|---|---|
| 2.2 Creditor's name Ann Harris Bennett Tax Assessor Creditor's mailing address 1001 Preston Street Houston TX 77002 Creditor's email address, if known Date debt was incurred <u>2021-2023</u> Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____ | Describe debtor's property that is subject to a lien Personalty Describe the lien Ad Valorem Taxes Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed |
|---|---|

page 2

| Column A | Column B |
|--|--|
| Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim |

| | |
|---|---|
| 2.3 Creditor's name <u>Ann Harris Bennett Tax Assessor</u> Creditor's mailing address <u>1001 Preston Street</u> <u>Houston TX 77002</u> Creditor's email address, if known Date debt was incurred <u>2021-2023</u> Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____ | Describe debtor's property that is subject to a lien Personalty Describe the lien Ad Valorem Taxes Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed |
|---|---|

page 3

Column A
Amount of claim
Do not deduct the
value of collateral.

Column B
Value of collateral
that supports
this claim

| | | | | |
|-----|--|---|------------|--------|
| 2.4 | Creditor's name Ann Harris Bennett Tax Assessor | Describe debtor's property that is subject to a lien | \$5,857.38 | \$0.00 |
|-----|--|---|------------|--------|

Personalty

Describe the lien

Ad Valorem Taxes

Houston TX 77002

Is the creditor an insider or related party?

☒ No☐ Yes

Creditor's email address, if known

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Date debt was incurred 2023

Last 4 digits of account number

As of the petition filing date, the claim is:

Check all that apply.

Do multiple creditors have an interest in the same property?

☐ Contingent

☐ Unliquidated

☐ Disputed☒ No

☐ Yes. Have you already specified the relative priority?

☐ No. Specify each creditor, including this creditor, and its relative priority.

☐ Yes. The relative priority of creditors is specified on lines

7080 Express Ln
Houston, TX 77078
Acct # xxx9433

| Column A | Column B |
|--|--|
| Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim |

| | |
|--|---|
| <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> 2.5 </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> Creditor's name Ann Harris Bennett Tax Assessor </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> Creditor's mailing address 1001 Preston Street </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px; height: 20px;"></div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> Houston TX 77002 </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> Creditor's email address, if known </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px; height: 20px;"></div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> Date debt was incurred 2021-2023 </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> Last 4 digits of account number _____ </div> <div style="margin-top: 10px;"> Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <div style="margin-left: 20px;"> <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____ </div> </div> | <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> Describe debtor's property that is subject to a lien </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> Vehicles </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> Describe the lien </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> Ad Valorem Taxes </div> <div style="margin-top: 10px;"> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes </div> <div style="margin-top: 10px;"> Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) </div> <div style="margin-top: 10px;"> As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed </div> |
|--|---|

page 5

| Column A | Column B |
|--|--------------------------|
| Amount of claim | Value of collateral |
| Do not deduct the value of collateral. | that supports this claim |

| | |
|---|--|
| <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> 2.6 </div> <p>Creditor's name <u>Ann Harris Bennett Tax Assessor</u></p> <p>Creditor's mailing address <u>1001 Preston Street</u> <u></u> <u></u></p> <p>Houston TX 77002</p> <p>Creditor's email address, if known <u></u></p> <p>Date debt was incurred <u>2020-2023</u></p> <p>Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u></p> <p>Do multiple creditors have an interest in the same property?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Have you already specified the relative priority?</p> <p style="margin-left: 20px;"><input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.</p> <p style="margin-left: 20px;"><input type="checkbox"/> Yes. The relative priority of creditors is specified on lines <u> </u></p> | <p>Describe debtor's property that is subject to a lien <u></u></p> <p>Personalty <u></u></p> <p>Describe the lien <u></u></p> <p>Ad Valorem Taxes <u></u></p> <p>Is the creditor an insider or related party?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)</p> <p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> |
|---|--|

page 6

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column A
Amount of claim
Do not deduct the
value of collateral.

Column B
Value of collateral
that supports
this claim

| | | | |
|------------|--|--|------------------------------------|
| 2.7 | Creditor's name <u>Ann Harris Bennett Tax Assessor</u> Creditor's mailing address <u>1001 Preston Street</u> <u>Houston TX 77002</u> Creditor's email address, if known _____ Date debt was incurred _____ Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____ | Describe debtor's property that is subject to a lien <u>Personalty</u> Describe the lien <u>Ad Valorem Taxes</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | <u>\$5,289.58</u> <u>\$0.00</u> |
|------------|--|--|------------------------------------|

3401 Navigation Blvd
 Houston TX 77003
 Stored products - warehouse
 Acct # xxx6689

| | | | |
|------------|---|--|--|
| 2.8 | Creditor's name <u>Brothers Produce</u> Creditor's mailing address <u>a PACA Trust Fund Acct</u> <u>PO Box 1207</u> <u>Friendswood TX 77549-1207</u> Creditor's email address, if known _____ Date debt was incurred <u>1/11/2023 - 1/24</u> Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____ | Describe debtor's property that is subject to a lien <u>PACA Trust Funds</u> Describe the lien <u>PACA Trust Funds</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | <u>\$7,780.00</u> <u>\$894,835.75</u> |
|------------|---|--|--|

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column A
Amount of claim
Do not deduct the
value of collateral.

Column B
Value of collateral
that supports
this claim

| | | | | |
|------------|--|--|--------------------|---------------------|
| 2.9 | Creditor's name <u>Classic Growers LLC</u> Creditor's mailing address <u>a PACA Trust Fund</u> <u>5255 Verna Behany</u> <u>Myakka City</u> <u>FL</u> <u>34251</u> Creditor's email address, if known _____ Date debt was incurred <u>1/2/20/22 - 12/26</u> Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____ | Describe debtor's property that is subject to a lien <u>PACA Trust Funds</u> Describe the lien <u>PACA Trust Funds</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | <u>\$21,250.00</u> | <u>\$894,835.75</u> |
|------------|--|--|--------------------|---------------------|

| | | | | |
|-------------|---|--|---------------------|---------------------|
| 2.10 | Creditor's name <u>Conagra Brands</u> Creditor's mailing address <u>Conagra and Affiliates</u> <u>222 Merchandise Mart Plaza</u> <u>Chicago</u> <u>IL</u> <u>60654</u> Creditor's email address, if known _____ Date debt was incurred <u>2018 - 2023</u> Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____ | Describe debtor's property that is subject to a lien <u>A/R with Conagra, Machinery and Equipment</u> Describe the lien <u>Agreement</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | <u>\$942,139.00</u> | <u>\$894,835.75</u> |
|-------------|---|--|---------------------|---------------------|

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column A
Amount of claim
Do not deduct the
value of collateral.

Column B
Value of collateral
that supports
this claim

| | | | | |
|-------------|---|--|--------------------|---------------------|
| 2.11 | Creditor's name <u>Cypress Fairbanks ISD Tax Assessor</u> Creditor's mailing address <u>10494 Jones Road</u> <u>Suite 106</u> <u>Houston TX 77065</u> Creditor's email address, if known _____ Date debt was incurred <u>2022</u> Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____ | Describe debtor's property that is subject to a lien <u>Personalty</u> Describe the lien <u>Taxes</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | <u>\$11,664.00</u> | <u>\$894,835.75</u> |
|-------------|---|--|--------------------|---------------------|

| | | | | |
|-------------|--|---|--------------------|---------------|
| 2.12 | Creditor's name <u>Cypress Fairbanks ISD Tax Assessor</u> Creditor's mailing address <u>10494 Jones Road</u> <u>Suite 106</u> <u>Houston TX 77065</u> Creditor's email address, if known _____ Date debt was incurred <u>2021-2022</u> Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____ | Describe debtor's property that is subject to a lien <u>Personalty</u> Describe the lien <u>Ad Valorem Taxes</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | <u>\$21,499.99</u> | <u>\$0.00</u> |
|-------------|--|---|--------------------|---------------|

5050 Campbell
 Houston TX
 Acct # xxx3204

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

| <i>Column A</i> | <i>Column B</i> |
|--|--|
| Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim |

| | | | |
|-------------|---|---|--|
| 2.13 | Creditor's name <u>EMC Staffing Solutions</u> <hr/> Creditor's mailing address <u>6410 Oak Masters Drive</u> <hr/> <u>Spring TX 77379</u> <hr/> Creditor's email address, if known <hr/> <hr/> Date debt was incurred <u>02/24/23 - 3/17/2</u> Last 4 digits of account number _____ <hr/> Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____ | Describe debtor's property that is subject to a lien <u>UCC on Temp Employee Contract</u> <hr/> Describe the lien <u>UCC</u> <hr/> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <hr/> Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) <hr/> As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | <u>\$98,617.00</u> <hr/> <u>\$894,835.75</u> <hr/> |
|-------------|---|---|--|

| | | | |
|-------------|--|--|---|
| 2.14 | Creditor's name <u>Gargiulo</u> <hr/> Creditor's mailing address <u>a PACA Trust Fund</u> <hr/> <u>15000 Old 41 North</u> <hr/> <u>Naples FL 34110</u> <hr/> Creditor's email address, if known <hr/> <hr/> Date debt was incurred <u>1/17/23 - 3/4/23</u> Last 4 digits of account number _____ <hr/> Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____ | Describe debtor's property that is subject to a lien <u>PACA Trust Funds</u> <hr/> Describe the lien <u>PACA Trust Funds</u> <hr/> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <hr/> Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) <hr/> As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | <u>\$154,800.00</u> <hr/> <u>\$894,835.75</u> <hr/> |
|-------------|--|--|---|

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

| Column A | Column B |
|--|--|
| Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim |

| | | | | |
|------|--|---|---------------------|---------------------|
| 2.15 | Creditor's name <u>Green Garden Produce LLC</u> Creditor's mailing address <u>a PACA Trust Fund</u> <u>477 Madison Ave, 6th Floor</u> <u>New York NY 10022</u> Creditor's email address, if known _____ Date debt was incurred <u>10/18/22 - 3/21/2</u> Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____ | Describe debtor's property that is subject to a lien <u>PACA Trust Funds</u> Describe the lien <u>PACA Trust Funds</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | <u>\$579,293.00</u> | <u>\$894,835.75</u> |
|------|--|---|---------------------|---------------------|

| | | | | |
|------|--|---|-----------------------|-----------------------|
| 2.16 | Creditor's name <u>Gulf Coast Business Credit</u> Creditor's mailing address <u>5949 Sherry Lane</u> <u>Suite 785</u> <u>Dallas TX 75225</u> Creditor's email address, if known _____ Date debt was incurred <u>2022 - 2023</u> Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____ | Describe debtor's property that is subject to a lien <u>UCC-1</u> Describe the lien <u>UCC-1</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | <u>\$2,391,668.00</u> | <u>\$1,414,194.00</u> |
|------|--|---|-----------------------|-----------------------|

| Column A | Column B |
|--|--------------------------|
| Amount of claim | Value of collateral |
| Do not deduct the value of collateral. | that supports this claim |

[illegible]

page 12

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column A
Amount of claim
Do not deduct the
value of collateral.

Column B
Value of collateral
that supports
this claim

| | | | | |
|------|---|--|--------------------|---------------------|
| 2.19 | Creditor's name <u>Kagan Realty Investors</u> Creditor's mailing address <u>8801 Knight Road</u> _____ <u>Houston TX 77054</u> Creditor's email address, if known _____ Date debt was incurred _____ Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____ | Describe debtor's property that is subject to a lien <u>Leased premises</u> Describe the lien <u>Landlord's Lien</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | <u>\$98,901.00</u> | <u>\$894,835.75</u> |
|------|---|--|--------------------|---------------------|

| | | | | |
|------|---|---|--------------------|---------------------|
| 2.20 | Creditor's name <u>Latin Specialties Produce Corp</u> Creditor's mailing address <u>a PACA Trust Company</u> <u>4132 Airline Drive</u> _____ <u>Houston TX 77022</u> Creditor's email address, if known _____ Date debt was incurred <u>9/12/22 - 10/12/2</u> Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____ | Describe debtor's property that is subject to a lien <u>PACA Trust Funds</u> Describe the lien <u>PACA Trust Funds</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | <u>\$12,864.00</u> | <u>\$894,835.75</u> |
|------|---|---|--------------------|---------------------|

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column A
Amount of claim
 Do not deduct the
 value of collateral.

Column B
Value of collateral
 that supports
 this claim

| | | | | |
|-------------|---|--|---------------------|---------------------|
| 2.21 | Creditor's name <u>Mex Flore Produce Company</u> Creditor's mailing address <u>a PACA Trust Company</u> <u>2216 Silver Street</u> <u>Houston TX 77007</u> Creditor's email address, if known Date debt was incurred <u>11/2/2022 -</u> Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____ | Describe debtor's property that is subject to a lien <u>PACA Trust Funds</u> Describe the lien <u>PACA Trust Funds</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | <u>\$499,064.00</u> | <u>\$894,835.75</u> |
|-------------|---|--|---------------------|---------------------|

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

| Name and address | On which line in Part 1 did you enter the related creditor? | Last 4 digits of account number for this entity |
|---|---|---|
| <u>Chad P Morrow, Esq.</u> | Line <u>2.1</u> | _____ |
| <u>909 Poydras St</u> | | |
| <u>Suite 2800</u> | | |
| <u>New Orleans LA 70112</u> | | |
| <u>Euler Hermes Collections North America</u> | Line <u>2.15</u> | _____ |
| <u>800 Red Brook Blvd</u> | | |
| <u>Suite 400C</u> | | |
| <u>Owings Mills MD 21117</u> | | |
| <u>Peter Smart, Esq.</u> | Line <u>2.19</u> | _____ |
| <u>Crain Caton & James</u> | | |
| <u>1401 McKinney Street</u> | | |
| <u>Suite 1700</u> | | |
| <u>Houston TX 77010</u> | | |
| <u>Robert E. Goldman, Esq.</u> | Line <u>2.21</u> | _____ |
| <u>1 East Broward Blvd</u> | | |
| <u>Suite 700</u> | | |
| <u>Fort Lauderdale FL 33301</u> | | |
| <u>Roy Cohn, Esq.</u> | Line <u>2.9</u> | _____ |
| <u>445 Crawfords Climb</u> | | |
| <u>Nellysford VA 22958</u> | | |
| <u>Steven M. De Falco</u> | Line <u>2.17</u> | _____ |
| <u>Meuers Law Firm</u> | | |
| <u>5395 Park Central Court</u> | | |
| <u>Naples FL 34109</u> | | |

Debtor Riba Foods, Inc. Case number (if known) _____**Part 2:** List Others to Be Notified for a Debt Already Listed in Part 1 -- Continuation Page

| Name and address | On which line in Part 1 did you enter the related creditor? | Last 4 digits of account number for this entity |
|--------------------------------|---|---|
| <u>Steven M. De Falco</u> | Line <u>2.14</u> | <u> </u> |
| <u>Meuers Law Firm</u> | | |
| <u>5395 Park Central Court</u> | | |
| <u>Naples</u> | | |
| <u>FL 34109</u> | | |

Fill in this information to identify the case:

Debtor Riba Foods, Inc.

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXAS

Case number _____
(if known)

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

- ☒ No. Go to Part 2.
☐ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or part. If more space is needed for priority unsecured claims, fill out and attach the Additional Page of Part 1.

Total claim Priority amount

2.1 Priority creditor's name and mailing address

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Date or dates debt was incurred

Is the claim subject to offset?

- ☐ No
☐ Yes

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(_____)

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If more space is needed for nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

| | |
|--|--|
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.1</div> Nonpriority creditor's name and mailing address <u>3 Rivers Logistics, Inc.</u> <u>60 Doughboy Road</u> <u>Gillett</u> <u>AR</u> <u>72055</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u> \$650.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.2</div> Nonpriority creditor's name and mailing address <u>84.51</u> <u>PO Box 635029</u> <u>Cincinnati</u> <u>OH</u> <u>45263</u> Date or dates debt was incurred <u>2021</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u> \$3,751.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.3</div> Nonpriority creditor's name and mailing address <u>A&B Environmental Services Inc</u> <u>10100 East Fwy</u> <u>Suite 100</u> <u>Houston</u> <u>TX</u> <u>77029</u> Date or dates debt was incurred <u>2022-2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u> \$2,555.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.4</div> Nonpriority creditor's name and mailing address <u>Advanced Business Copiers</u> <u>PO Box 12018</u> <u>Spring X 77391</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u> \$878.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

| | |
|--|---|
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.5</div> Nonpriority creditor's name and mailing address <u>Advanced Spice & Trading</u> <u>13951 Senlac Drive</u> <u>Dallas</u> TX <u>75234</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$19,171.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.6</div> Nonpriority creditor's name and mailing address <u>AG Logistics LLC</u> <u>6960 Cherokee Avenue</u> <u>Fort Myers</u> FL <u>33905</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$6,858.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.7</div> Nonpriority creditor's name and mailing address <u>Ajinomoto North America</u> <u>Dept CH 10983</u> <u>Palatine</u> IL <u>60055</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$45,713.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.8</div> Nonpriority creditor's name and mailing address <u>Alchemy Systems</u> <u>5301 Riata Park Court</u> <u>Building F - Suite 100</u> <u>Austin</u> TX <u>78727</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$13,341.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

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|--|--|
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.9</div> Nonpriority creditor's name and mailing address <u>Alliance Critical Capacity</u> <u>dba Alliance Shippers Inc.</u> <u>PO Box 826896</u> <u>Philadelphia</u> <u>PA</u> <u>19182</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$33,500.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.10</div> Nonpriority creditor's name and mailing address <u>Amara Transportation</u> <u>PO Box 206773</u> <u>Dallas</u> <u>TX</u> <u>75320</u> Date or dates debt was incurred <u>2022 - 2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$5,200.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.11</div> Nonpriority creditor's name and mailing address <u>Ancor</u> <u>24815 Network Place</u> <u>Chicago IL 606373</u> Date or dates debt was incurred <u>2022 - 2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$338,324.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.12</div> Nonpriority creditor's name and mailing address <u>AmeriGas</u> <u>PO Box 660288</u> <u>Dallas</u> <u>TX</u> <u>75266</u> Date or dates debt was incurred <u>2022 - 2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$3,179.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

| | |
|--|---|
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.13</div> Nonpriority creditor's name and mailing address <u>Applied Products Inc</u> <u>PO Box 776265</u> <u>Chicago</u> <u>IL</u> <u>60677</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$5,124.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.14</div> Nonpriority creditor's name and mailing address <u>Aramark Uniforms</u> <u>AUS Central Lockbock</u> <u>PO Box 731676</u> <u>Dallas</u> <u>TX</u> <u>75373</u> Date or dates debt was incurred <u>2022 - 2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$72,018.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.15</div> Nonpriority creditor's name and mailing address <u>Atlantic Coupon Redemption Cnt</u> <u>6 Hinchman Ave</u> <u>Denville</u> <u>NJ</u> <u>07834</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$8.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.16</div> Nonpriority creditor's name and mailing address <u>B&R Stores Inc</u> <u>4554 W Street</u> <u>Lincoln</u> <u>NE</u> <u>68503</u> Date or dates debt was incurred <u>2021</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$92.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

| | |
|---|--|
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.17</div> Nonpriority creditor's name and mailing address <u>Babbitt International</u> <u>PO Box 70094</u> <u>Houston</u> TX <u>77270</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$1,198.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.18</div> Nonpriority creditor's name and mailing address <u>Bayou City Backflow & Plumbing</u> <u>13807 Cedar</u> <u>Santa FE</u> TX <u>77517</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$876.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.19</div> Nonpriority creditor's name and mailing address <u>BBI Logistics</u> <u>PO Box 970</u> <u>Columbus</u> OH <u>43216</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$1,900.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.20</div> Nonpriority creditor's name and mailing address <u>Belmark Inc</u> <u>PO Box 8814</u> <u>Carol Stream</u> IL <u>60197</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>(\$747.38)</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

| | |
|---|--|
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.21</div> Nonpriority creditor's name and mailing address <u>Belt Power</u> <u>PO Box 306103</u> <u>Nashville</u> <u>TN</u> <u>37230</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$1,535.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.22</div> Nonpriority creditor's name and mailing address <u>Ben E Keith Foods</u> <u>PO Box 2497</u> <u>Fort Worth</u> <u>TX</u> <u>76113</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$31,963.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.23</div> Nonpriority creditor's name and mailing address <u>Berlin Packaging</u> <u>PO Box 74007164</u> <u>Chicago</u> <u>IL</u> <u>60674</u> Date or dates debt was incurred <u>2022 - 2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$796,985.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.24</div> Nonpriority creditor's name and mailing address <u>Budget Restaurant Supply</u> <u>8800 W. Sam Houston Pkwy South</u> <u>Houston</u> <u>TX</u> <u>77099</u> Date or dates debt was incurred <u>2021 - 2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$8,440.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

| | |
|--|---|
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.25</div> Nonpriority creditor's name and mailing address <u>Carr Riggs & Ingram</u> <u>PO Box 974715</u> <u>Dallas</u> TX <u>75397</u> Date or dates debt was incurred <u>2021</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$5,200.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.26</div> Nonpriority creditor's name and mailing address <u>Celtic International</u> <u>62538 Collections Center Drive</u> <u>Chicago</u> IL <u>60693-0625</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$3,800.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.27</div> Nonpriority creditor's name and mailing address <u>ChaseSource LP</u> <u>3311 West Alabama St</u> <u>Houston</u> TX <u>77098</u> Date or dates debt was incurred <u>2021 - 2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$51,686.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.28</div> Nonpriority creditor's name and mailing address <u>Chester - Jensen</u> <u>PO Box 908</u> <u>Chester</u> PA <u>19016-0908</u> Date or dates debt was incurred <u>2021</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$3,899.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

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| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.29</div> Nonpriority creditor's name and mailing address <u>Cintas</u> <u>5355 W Sam Houston Pkwy North</u> <u>Suite 300</u> <u>Houston</u> TX <u>77041</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$31,480.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.30</div> Nonpriority creditor's name and mailing address <u>City of Houston</u> <u>Water Dept.</u> <u>PO Box 203887</u> <u>Houston</u> TX <u>77216-3887</u> Date or dates debt was incurred <u>2022 - 2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$36,941.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.31</div> Nonpriority creditor's name and mailing address <u>Clayton Industries</u> <u>17477 Hurley St</u> <u>La Puente</u> CA <u>91744</u> Date or dates debt was incurred <u>2021</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$5,461.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.32</div> Nonpriority creditor's name and mailing address <u>Communikay</u> <u>1900 Hwy 35 Bypass North</u> <u>Alvin</u> TX <u>77511</u> Date or dates debt was incurred <u>2022 - 2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$8,013.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 2: Additional Page

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Amount of claim

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| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.33</div> Nonpriority creditor's name and mailing address <u>Corrugated Concepts</u> <u>PO Box 731152</u> <u>Dallas</u> <u>TX</u> <u>75373-1152</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$137,185.00</u> |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.34</div> Nonpriority creditor's name and mailing address <u>Coyote Logistics</u> <u>PO Box 742636</u> <u>Atlanta</u> <u>GA</u> <u>30374-7629</u> Date or dates debt was incurred <u>2022 - 2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$172,508.00</u> |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.35</div> Nonpriority creditor's name and mailing address <u>Creative Financial Staffing</u> <u>PO Box 95111</u> <u>Chicago</u> <u>IL</u> <u>60694-5111</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$6,102.00</u> |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.36</div> Nonpriority creditor's name and mailing address <u>Crest Foods</u> <u>PO Box 7510</u> <u>Edmond</u> <u>OK</u> <u>73083-7510</u> Date or dates debt was incurred <u>2021</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$208.00</u> |

Debtor Riba Foods, Inc.

Case number (if known) _____

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Amount of claim

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| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.37</div> Nonpriority creditor's name and mailing address <u>Crown Lift Trucks</u> <u>PO Box 641173</u> <u>Cincinnati</u> <u>OH</u> <u>45264-1173</u> Date or dates debt was incurred <u>2022 - 2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$19,217.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.38</div> Nonpriority creditor's name and mailing address <u>Culinary Farms</u> <u>1244 E Beamer Street</u> <u>Woodland</u> <u>CA</u> <u>95776</u> Date or dates debt was incurred <u>2022 - 2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$74,721.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.39</div> Nonpriority creditor's name and mailing address <u>Dart Advantage Logistics</u> <u>PO Box 64746</u> <u>Attn: Accounts Receivable</u> <u>Saint Paul</u> <u>MN</u> <u>55164-0746</u> Date or dates debt was incurred <u>2022 - 2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$73,120.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.40</div> Nonpriority creditor's name and mailing address <u>DC Scott & Associates</u> <u>1202 W Bitters Road</u> <u>Building 2</u> <u>San Antonio</u> <u>TX</u> <u>78216</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$364.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 2: Additional Page

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Amount of claim

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| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.41</div> Nonpriority creditor's name and mailing address <u>Dept Health Human Services</u> <u>Bureau of Consumer Health Ser.</u> <u>PO Box 30008</u> <u>Houston</u> TX <u>77230-0008</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <u>\$622.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.42</div> Nonpriority creditor's name and mailing address <u>Diana Food</u> <u>PO Box 157</u> <u>Silverton</u> OR <u>97381</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <u>\$19,858.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.43</div> Nonpriority creditor's name and mailing address <u>Digital Phone Works</u> <u>PO Box 1352</u> <u>Cypress</u> TX <u>77410</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <u>\$1,397.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.44</div> Nonpriority creditor's name and mailing address <u>Dipasa USA Inc</u> <u>PO Box 1576</u> <u>San Antonio</u> TX <u>78296-1576</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> | As of the petition filing date, the claim is: <u>\$6,467.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Debtor Riba Foods, Inc.

Case number (if known) _____

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Amount of claim

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| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.45</div> Nonpriority creditor's name and mailing address <u>Domino Amjet Inc</u> <u>3809 Collection Center Drive</u> <u>Chicago</u> <u>IL</u> <u>60693</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$5,266.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.46</div> Nonpriority creditor's name and mailing address <u>DXP Enterprises Inc</u> <u>PO Box 840511</u> <u>Dallas</u> <u>TX</u> <u>75284</u> Date or dates debt was incurred <u>2021 - 2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$628.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.47</div> Nonpriority creditor's name and mailing address <u>Eatem Foods Company</u> <u>Attn: Mike Schneider</u> <u>75 Remittance Dr., Ste 1046</u> <u>Chicago</u> <u>IL</u> <u>60675</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$20,723.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.48</div> Nonpriority creditor's name and mailing address <u>Echo Global Logistics Inc.</u> <u>Attn: Accounts Receivable</u> <u>22168 Network Place</u> <u>Chicago</u> <u>IL</u> <u>60673-1221</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$6,290.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 2: Additional Page

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Amount of claim

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| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.49</div> Nonpriority creditor's name and mailing address <u>Elite Spice Inc.</u> <u>PO Box 781025</u> <u>Philadelphia</u> <u>PA</u> <u>19178</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number _ _ _ _ | As of the petition filing date, the claim is: <u>\$34,170.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.50</div> Nonpriority creditor's name and mailing address <u>Eriez Manufacturing Co</u> <u>2200 Asbury Road</u> <u>Erie</u> <u>PA</u> <u>16506-1402</u> Date or dates debt was incurred <u>2021</u> Last 4 digits of account number _ _ _ _ | As of the petition filing date, the claim is: <u>\$6,569.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.51</div> Nonpriority creditor's name and mailing address <u>Estes Express Lines</u> <u>PO Box 105160</u> <u>Atlanta</u> <u>GA</u> <u>30348</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number _ _ _ _ | As of the petition filing date, the claim is: <u>\$3,755.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.52</div> Nonpriority creditor's name and mailing address <u>Federal Express</u> <u>PO Box 660481</u> <u>Dallas</u> <u>TX</u> <u>75266</u> Date or dates debt was incurred <u>2022 - 2023</u> Last 4 digits of account number _ _ _ _ | As of the petition filing date, the claim is: <u>\$2,565.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Debtor Riba Foods, Inc.

Case number (if known) _____

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Amount of claim

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| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.53</div> Nonpriority creditor's name and mailing address <u>FedEx Freight</u> <u>Dept CH</u> <u>PO Box 10306</u> <u>Palatine</u> <u>IL</u> <u>60055-0306</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$77.00</u> |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.54</div> Nonpriority creditor's name and mailing address <u>Fleischmann's Vinegar</u> <u>12605 Hidden Creek Way</u> <u>Cerritos</u> <u>CA</u> <u>90703</u> Date or dates debt was incurred <u>2022 - 2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$49,771.00</u> |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.55</div> Nonpriority creditor's name and mailing address <u>Flexxray</u> <u>3751 New York Ave</u> <u>Suite 130</u> <u>Arlington</u> <u>TX</u> <u>76014</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$10,546.00</u> |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.56</div> Nonpriority creditor's name and mailing address <u>Food Safety Net Services</u> <u>PO Box 116438</u> <u>Carrollton</u> <u>TX</u> <u>75011-6438</u> Date or dates debt was incurred <u>2022 - 2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$11,346.00</u> |

Debtor Riba Foods, Inc.

Case number (if known) _____

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Amount of claim

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| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.57</div> Nonpriority creditor's name and mailing address <u>Full Line Food Inc</u> <u>7200 Wynnpark Drive</u> <u>Houston TX 77008-6030</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$520.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.58</div> Nonpriority creditor's name and mailing address <u>Geimans' Advertising Inc</u> <u>12337 Jones Rd</u> <u>Suite 200-15</u> <u>Houston TX 77070</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$836.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.59</div> Nonpriority creditor's name and mailing address <u>Genesis</u> <u>9514 Mykawa Road</u> <u>Houston TX 77048</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$1,824.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.60</div> Nonpriority creditor's name and mailing address <u>Genius Central</u> <u>n/k/a SPS Commerce Inc</u> <u>333 South Seventh Street # 1000</u> <u>Minneapolis MN 55402</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$90.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 2: Additional Page

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Amount of claim

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| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.61</div> Nonpriority creditor's name and mailing address <u>Givaudan Flavors Corp</u> <u>4705 US 92 East</u> <u>Lakeland</u> <u>FL</u> <u>33801</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$17,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.62</div> Nonpriority creditor's name and mailing address <u>Global Tranz Enterprises</u> <u>PO Box 203285</u> <u>Dallas</u> <u>TX</u> <u>75320-3285</u> Date or dates debt was incurred <u>2021 - 2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$14,225.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.63</div> Nonpriority creditor's name and mailing address <u>Grayson Armature Works Inc</u> <u>315 Curtis Ave</u> <u>Pasadena</u> <u>TX</u> <u>77502</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$4,485.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.64</div> Nonpriority creditor's name and mailing address <u>Griffin Food Company Inc.</u> <u>PO Box 1183</u> <u>Norman</u> <u>OK</u> <u>73070</u> Date or dates debt was incurred <u>2022 - 2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$4,309.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Debtor Riba Foods, Inc.

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Amount of claim

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| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.65</div> Nonpriority creditor's name and mailing address Guardian PO Box 677458 _____ _____ Dallas TX 75267 Date or dates debt was incurred <u>2023</u> Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$14,086.00</u> |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.66</div> Nonpriority creditor's name and mailing address Haile Resources 2650 Freewood Dr _____ _____ Dallas TX 75220 Date or dates debt was incurred <u>2023</u> Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$89,401.00</u> |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.67</div> Nonpriority creditor's name and mailing address Harlow-HRK Sales & Marketing PO Box 24247 _____ _____ Seattle WA 98124-0247 Date or dates debt was incurred <u>2021</u> Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$5,525.00</u> |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.68</div> Nonpriority creditor's name and mailing address Harps USA PO Box 48 _____ _____ Springdale AR 72765 Date or dates debt was incurred <u>2021</u> Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$93.00</u> |

Debtor Riba Foods, Inc.

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Amount of claim

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|-------------|---|---|-------------------|
| 3.69 | Nonpriority creditor's name and mailing address | As of the petition filing date, the claim is: <i>Check all that apply.</i> | <u>\$1,260.00</u> |
| | High Tech Advantage | <input type="checkbox"/> Contingent | |
| | 17350 State Highway 249 | <input type="checkbox"/> Unliquidated | |
| | Ste 220 # 1620 | <input type="checkbox"/> Disputed | |
| | | Basis for the claim: | |
| | Houston TX 77064 | Goods & Services | |
| | Date or dates debt was incurred 2021 - 2022 | Is the claim subject to offset? | |
| | Last 4 digits of account number _ _ _ _ | <input checked="" type="checkbox"/> No | |
| | | <input type="checkbox"/> Yes | |

| | | | |
|-------------|---|---|--------------------|
| 3.70 | Nonpriority creditor's name and mailing address | As of the petition filing date, the claim is: <i>Check all that apply.</i> | <u>\$21,648.00</u> |
| | Hiland Dairy | <input type="checkbox"/> Contingent | |
| | 6333 FM 1960 Road West | <input type="checkbox"/> Unliquidated | |
| | | <input type="checkbox"/> Disputed | |
| | | Basis for the claim: | |
| | Humble TX 77338 | Goods & Services | |
| | Date or dates debt was incurred 2023 | Is the claim subject to offset? | |
| | Last 4 digits of account number _ _ _ _ | <input checked="" type="checkbox"/> No | |
| | | <input type="checkbox"/> Yes | |

| | | | |
|-------------|---|---|--------------------|
| 3.71 | Nonpriority creditor's name and mailing address | As of the petition filing date, the claim is: <i>Check all that apply.</i> | <u>\$10,550.00</u> |
| | Hoosier Logistics Inc | <input type="checkbox"/> Contingent | |
| | 155 E Market St | <input type="checkbox"/> Unliquidated | |
| | Suite 300 | <input type="checkbox"/> Disputed | |
| | | Basis for the claim: | |
| | Indianapolis IN 46204 | Goods & Services | |
| | Date or dates debt was incurred 2021 | Is the claim subject to offset? | |
| | Last 4 digits of account number _ _ _ _ | <input checked="" type="checkbox"/> No | |
| | | <input type="checkbox"/> Yes | |

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| 3.72 | Nonpriority creditor's name and mailing address | As of the petition filing date, the claim is: <i>Check all that apply.</i> | <u>\$29.00</u> |
| | Hy-Vee Inc | <input type="checkbox"/> Contingent | |
| | 5820 Westown Parkway | <input type="checkbox"/> Unliquidated | |
| | | <input type="checkbox"/> Disputed | |
| | | Basis for the claim: | |
| | West Des Moines IA 50266 | Goods & Services | |
| | Date or dates debt was incurred 2021 | Is the claim subject to offset? | |
| | Last 4 digits of account number _ _ _ _ | <input checked="" type="checkbox"/> No | |
| | | <input type="checkbox"/> Yes | |

Debtor Riba Foods, Inc.

Case number (if known) _____

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Amount of claim

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| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.73</div> Nonpriority creditor's name and mailing address <u>Hygiena LLC</u> <u>941 Avenida Acaso</u> <u>Camarillo</u> <u>CA</u> <u>93012</u> Date or dates debt was incurred <u>2021 - 2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$9,496.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.74</div> Nonpriority creditor's name and mailing address <u>Impact Sales Group</u> <u>PO Box 24131</u> <u>Seattle</u> <u>WA</u> <u>98124-0131</u> Date or dates debt was incurred <u>2021 - 2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$22,680.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.75</div> Nonpriority creditor's name and mailing address <u>Imperial Packaging</u> <u>601 Skokie Blvd</u> <u>Suite 2D</u> <u>Northbrook</u> <u>IL</u> <u>60062</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$3,258.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.76</div> Nonpriority creditor's name and mailing address <u>Indel Foods</u> <u>11415 Cedar Oak Dr</u> <u>El Paso</u> <u>TX</u> <u>79936</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$15,425.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Debtor Riba Foods, Inc.

Case number (if known) _____

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Amount of claim

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| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.77</div> Nonpriority creditor's name and mailing address <u>Ingredion</u> <u>PO Box 409882</u> <u>Atlanta</u> <u>GA</u> <u>30384-9882</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$12,366.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.78</div> Nonpriority creditor's name and mailing address <u>Inkjet Inc</u> <u>11111 Inkjet Way</u> <u>Willis</u> <u>TX</u> <u>77378</u> Date or dates debt was incurred <u>2022 - 2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$11,765.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.79</div> Nonpriority creditor's name and mailing address <u>Inmar / Youtech LLC</u> <u>Lockbox # 777843</u> <u>7843 Solution Center</u> <u>Chicago</u> <u>IL</u> <u>60677-7008</u> Date or dates debt was incurred <u>2021 - 2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$8,799.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.80</div> Nonpriority creditor's name and mailing address <u>Innovative Packaging Solutions</u> <u>43513 Ridge Park Dr</u> <u>Temecula</u> <u>CA</u> <u>92590</u> Date or dates debt was incurred <u>2021 - 2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$39,065.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 2: Additional Page

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Amount of claim

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| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.81</div> Nonpriority creditor's name and mailing address <u>Interflon America</u> <u>222 West Las Colinas Blvd</u> <u>Irving</u> TX <u>75039</u> Date or dates debt was incurred <u>2021</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$1,037.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.82</div> Nonpriority creditor's name and mailing address <u>International Food Products</u> <u>PO Box 415000</u> <u>MSC 7592</u> <u>Nashville</u> TN <u>37241</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$36,161.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.83</div> Nonpriority creditor's name and mailing address <u>International Food Systems</u> <u>1614 IH 35 North</u> <u>New Braunfels</u> TX <u>78130</u> Date or dates debt was incurred <u>2022 - 2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$49,305.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.84</div> Nonpriority creditor's name and mailing address <u>Interstate Battery Center</u> <u>10959 Cypress Creek Pkwy</u> <u>Suite F</u> <u>Houston</u> TX <u>77070</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$133.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Debtor Riba Foods, Inc.

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Amount of claim

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| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.85</div> Nonpriority creditor's name and mailing address <u>Jenkins Brokerage Co</u> <u>1500 S. Zarzamora St</u> <u>San Antonio</u> TX <u>78207</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$11,969.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.86</div> Nonpriority creditor's name and mailing address <u>JG Boswell Co</u> <u>36889 Hwy 58</u> <u>Buttonwillow</u> CA <u>93206</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$50,028.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.87</div> Nonpriority creditor's name and mailing address <u>Kalsec Inc</u> <u>PO Box 50511</u> <u>Kalamazoo</u> MI <u>49005</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$5,143.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.88</div> Nonpriority creditor's name and mailing address <u>Kaps-All</u> <u>200 Mill Rd</u> <u>Riverhead</u> NY <u>11901</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$1,215.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Debtor Riba Foods, Inc.

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Amount of claim

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| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.89</div> Nonpriority creditor's name and mailing address <u>Kerry</u> <u>PO Box 98489</u> <u>Chicago</u> <u>IL</u> <u>60693</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$10,999.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.90</div> Nonpriority creditor's name and mailing address <u>Kevala International</u> <u>3144 E Maria Street</u> <u>Compton</u> <u>CA</u> <u>90221</u> Date or dates debt was incurred <u>2021</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$11,540.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.91</div> Nonpriority creditor's name and mailing address <u>Keyence Corp of America</u> <u>500 Park Blvd</u> <u>Suite 200</u> <u>Itasca</u> <u>IL</u> <u>60143</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$1,236.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.92</div> Nonpriority creditor's name and mailing address <u>Kroger Regional Accounting Svc Cntr</u> <u>2496 Solutions Center</u> <u>Lockbox # 773496</u> <u>Chicago</u> <u>IL</u> <u>60677</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$16,756.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

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| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.93</div> Nonpriority creditor's name and mailing address <u>Lee Kum Kee Foods Inc</u> <u>14841 Don Julian Rd</u> <u>La Puente</u> <u>CA</u> <u>91746</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$36,924.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.94</div> Nonpriority creditor's name and mailing address <u>Linde Gas & Equip Inc</u> <u>PO Box 120812</u> <u>Dallas</u> <u>TX</u> <u>75312</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$78.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.95</div> Nonpriority creditor's name and mailing address <u>Lineage Logistics, PFS LLC</u> <u>PO Box 734938</u> <u>Dallas</u> <u>TX</u> <u>75373</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$782.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.96</div> Nonpriority creditor's name and mailing address <u>Major Products</u> <u>PO Box 675</u> <u>66 Industrial Ave</u> <u>Little Ferry</u> <u>NJ</u> <u>07643</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$9,315.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 2: Additional Page

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Amount of claim

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| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.97</div> Nonpriority creditor's name and mailing address <u>Marloe Group Inc</u> <u>6727 Maple Dr</u> <u>Humble</u> TX <u>77338</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$1,511.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.98</div> Nonpriority creditor's name and mailing address <u>Marva Maid Dairy</u> <u>PO Box 392612</u> <u>Pittsburgh</u> PA <u>15251</u> Date or dates debt was incurred <u>2022 - 2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$2,670.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.99</div> Nonpriority creditor's name and mailing address <u>Matrix Packaging Machinery</u> <u>PO Box 932182</u> <u>Cleveland</u> OH <u>44193</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$10,913.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.100</div> Nonpriority creditor's name and mailing address <u>McKeever Enterprises</u> <u>4216 South Hocker - Bldg 9</u> <u>Independence</u> MO <u>64055</u> Date or dates debt was incurred <u>2021</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$207.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 2: Additional Page

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Amount of claim

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| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.101</div> Nonpriority creditor's name and mailing address <u>McMaster - Carr</u> <u>PO Box 7690</u> <u>Chicago</u> <u>IL</u> <u>60680</u> Date or dates debt was incurred <u>2017, 2021 - 2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$13,364.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.102</div> Nonpriority creditor's name and mailing address <u>Mexilink Inc</u> <u>PO Box 4346; Dept 229</u> <u>Houston</u> <u>TX</u> <u>77210</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$82,571.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.103</div> Nonpriority creditor's name and mailing address <u>Minsa Corporation</u> <u>2622 Solution Center</u> <u>Chicago</u> <u>IL</u> <u>60677</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$1,937.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.104</div> Nonpriority creditor's name and mailing address <u>MMC Premium Label Solutions</u> <u>1530 Morse Avenue</u> <u>Elk Grove Village</u> <u>IL</u> <u>60007</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$188,433.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 2: Additional Page

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Amount of claim

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| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.105</div> Nonpriority creditor's name and mailing address <u>NCH Retailer Services</u> <u>25651 Network Place</u> <u>Chicago</u> <u>IL</u> <u>60673</u> Date or dates debt was incurred <u>203</u> Last 4 digits of account number _ _ _ _ | As of the petition filing date, the claim is: <u>\$8.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.106</div> Nonpriority creditor's name and mailing address <u>New Mexico Green Chile Company LLC</u> <u>1807 Don Lewis Drive</u> <u>Artesia</u> <u>NM</u> <u>88210</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number _ _ _ _ | As of the petition filing date, the claim is: <u>\$8,352.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.107</div> Nonpriority creditor's name and mailing address <u>ODP Business Solutions</u> <u>PO Box 660113</u> <u>Dallas</u> <u>TX</u> <u>75266-0113</u> Date or dates debt was incurred <u>2022 - 2023</u> Last 4 digits of account number _ _ _ _ | As of the petition filing date, the claim is: <u>\$4,132.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.108</div> Nonpriority creditor's name and mailing address <u>OFICRS</u> <u>Dept 960552</u> <u>Oklahoma City</u> <u>OK</u> <u>73196-0552</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number _ _ _ _ | As of the petition filing date, the claim is: <u>\$22.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 2: Additional Page

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Amount of claim

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| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.109</div> Nonpriority creditor's name and mailing address <u>Olam Chile Pepper</u> <u>Lockbox # 731254</u> <u>PO Box 731254</u> <u>Dallas</u> TX <u>75373</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$19,166.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.110</div> Nonpriority creditor's name and mailing address <u>Oncall Staffing Inc</u> <u>PO Box 55569</u> <u>Houston</u> TX <u>77255</u> Date or dates debt was incurred <u>2022 - 2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$361,474.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.111</div> Nonpriority creditor's name and mailing address <u>Pacific Meridian Group Inc</u> <u>5301 Longley Lane</u> <u>Suite # D-159</u> <u>Reno</u> NV <u>89511</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$15,638.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.112</div> Nonpriority creditor's name and mailing address <u>Page Davis & Hill PC</u> <u>1415 Louisiana St</u> <u>22nd Floor</u> <u>Houston</u> TX <u>77002</u> Date or dates debt was incurred <u>2021</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$14,261.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 2: Additional Page

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Amount of claim

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| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.113</div> Nonpriority creditor's name and mailing address <u>PC Matic</u> <u>2515 West 22nd Street</u> <u>Sioux City</u> <u>IA</u> <u>51102</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$1,860.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.114</div> Nonpriority creditor's name and mailing address <u>Plochman Inc</u> <u>1333 Boudreau Rd</u> <u>Manteno</u> <u>IL</u> <u>60950</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$9,983.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.115</div> Nonpriority creditor's name and mailing address <u>Precision Scales</u> <u>5829 W Sam Houston Pkwy # 205</u> <u>Houston</u> <u>TX</u> <u>77041</u> Date or dates debt was incurred <u>2022 - 2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$6,716.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.116</div> Nonpriority creditor's name and mailing address <u>Prime Packaging</u> <u>4008 Louetta Rd # 602</u> <u>Spring</u> <u>TX</u> <u>77388-4405</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$6,716.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 2: Additional Page

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Amount of claim

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| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.117</div> Nonpriority creditor's name and mailing address <u>Progressive Pumps Corp</u> <u>20108 Krahn Road</u> <u>Spring TX 77388</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$3,284.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.118</div> Nonpriority creditor's name and mailing address <u>Quotient</u> <u>PO Box 204472</u> <u>Dallas TX 75320</u> Date or dates debt was incurred <u>2021</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$2,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.119</div> Nonpriority creditor's name and mailing address <u>Randolp Heubach</u> <u>61 Lincoln Park</u> <u>San Anselmo CA 94960-2563</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$12.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.120</div> Nonpriority creditor's name and mailing address <u>Red Oak Foods</u> <u>35 Trautwein Cres</u> <u>Closter NJ 07624</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$1,623.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 2: Additional Page

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Amount of claim

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|---|---|
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.121</div> Nonpriority creditor's name and mailing address <u>Redemption Processing Representative</u> <u>PO Box 724</u> <u>Blairstown</u> <u>NJ</u> <u>07825-0274</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$4.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.122</div> Nonpriority creditor's name and mailing address <u>Ref Leasing Co</u> <u>245 E North Ave</u> <u>Carol Stream</u> <u>IL</u> <u>60188</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$15,900.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.123</div> Nonpriority creditor's name and mailing address <u>Relevant Industrial LLC</u> <u>PO Box 95605</u> <u>Grapevine</u> <u>TX</u> <u>76099</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$612.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.124</div> Nonpriority creditor's name and mailing address <u>RJW Logistics</u> <u>PO Box 1309</u> <u>Bolingbrook</u> <u>IL</u> <u>60440</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$3,153.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

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|---|--|--------------------|
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.125</div> Nonpriority creditor's name and mailing address <u>RJW Warehouse</u> <u>PO Box 1309</u> <u>Bolingbrook</u> <u>IL</u> <u>60440</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$1,347.00</u> |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.126</div> Nonpriority creditor's name and mailing address <u>Robert Half</u> <u>PO Box 743295</u> <u>Los Angeles</u> <u>CA</u> <u>90074-3295</u> Date or dates debt was incurred _____ Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$2,293.50</u> |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.127</div> Nonpriority creditor's name and mailing address <u>Schiff Food Product Co</u> <u>944 Riverview Dr</u> <u>Totowa</u> <u>NJ</u> <u>07512</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$13,591.00</u> |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.128</div> Nonpriority creditor's name and mailing address <u>Schreiber Int'l</u> <u>600 E Crescent Ave</u> <u>Saddle River</u> <u>NJ</u> <u>07458</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$1.00</u> |

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 2: Additional Page

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Amount of claim

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| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.129</div> Nonpriority creditor's name and mailing address <u>SciCO Supply LLC</u> <u>PO Box 116438</u> <u>Carrollton</u> <u>TX</u> <u>75011-6438</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$1,030.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.130</div> Nonpriority creditor's name and mailing address <u>Shuttleworth LLC</u> <u>10 Commercial Road</u> <u>Huntington</u> <u>IN</u> <u>46750</u> Date or dates debt was incurred <u>2021</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$8,642.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.131</div> Nonpriority creditor's name and mailing address <u>Southern Dock Products</u> <u>611 East Sam Houston Pkwy</u> <u>Suite 200</u> <u>Pasadena</u> <u>TX</u> <u>77503</u> Date or dates debt was incurred <u>2022 - 2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$17,125.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.132</div> Nonpriority creditor's name and mailing address <u>Southern Seasonings</u> <u>206 Burgess Dr</u> <u>Broussard</u> <u>LA</u> <u>70518</u> Date or dates debt was incurred <u>2022 - 2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$5,148.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

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| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.133</div> Nonpriority creditor's name and mailing address <u>Southwest AC Supply</u> <u>9612 Westpark Dr</u> <u>Houston TX 77063</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$168.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.134</div> Nonpriority creditor's name and mailing address <u>Specs Liquor</u> <u>2410 Smith St</u> <u>Houston TX 77006</u> Date or dates debt was incurred <u>2022 - 2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$36,212.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.135</div> Nonpriority creditor's name and mailing address <u>Splash PrintGraphics & Design</u> <u>5050 Campbell Rd</u> <u>Houston TX 77041</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$1,743.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.136</div> Nonpriority creditor's name and mailing address <u>Standard Knapp</u> <u>63 Pickering Street</u> <u>Portland CT 06480</u> Date or dates debt was incurred <u>2021</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$17,128.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 2: Additional Page

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Amount of claim

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| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.137</div> Nonpriority creditor's name and mailing address <u>Stream</u> <u>PO Box 650261</u> <u>Dallas</u> TX <u>75265</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$600.00</u> |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.138</div> Nonpriority creditor's name and mailing address <u>Sweetener Supply</u> <u>PO Box 6778</u> <u>Carol Stream</u> IL <u>60197</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$1,259.00</u> |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.139</div> Nonpriority creditor's name and mailing address <u>Syndigo LLC</u> <u>PO Box 734311</u> <u>Chicago</u> IL <u>60673</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$8,310.00</u> |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.140</div> Nonpriority creditor's name and mailing address <u>Sysco Food Services Inc.</u> <u>10710 Greens Crossing Blvd</u> <u>Houston</u> TX <u>77038</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$4,932.00</u> |

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 2: Additional Page

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Amount of claim

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| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.141</div> Nonpriority creditor's name and mailing address <u>Tall Grass Freight Co</u> <u>PO Box 88598</u> <u>Carol Stream</u> <u>IL</u> <u>60188</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$1,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.142</div> Nonpriority creditor's name and mailing address <u>Tena Transport</u> <u>PO Box 1572</u> <u>Denver</u> <u>CO</u> <u>80217</u> Date or dates debt was incurred <u>2021</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$6,500.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.143</div> Nonpriority creditor's name and mailing address <u>The Chile Guy</u> <u>168 East Calle Don Francisco</u> <u>Bernalillo</u> <u>NM</u> <u>87004</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$64,754.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.144</div> Nonpriority creditor's name and mailing address <u>The Milky Whey</u> <u>116 Glacier Dr</u> <u>Suite 201</u> <u>Lolo</u> <u>MT</u> <u>59847</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$17,019.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 2: Additional Page

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Amount of claim

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| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.145</div> Nonpriority creditor's name and mailing address <u>The Neil Jones Food Company</u> <u>PO Box 842476</u> <u>Dallas</u> <u>TX</u> <u>75284</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$73,071.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.146</div> Nonpriority creditor's name and mailing address <u>TQL - Total Quality Logistics</u> <u>PO Box 634558</u> <u>Cincinnati</u> <u>OH</u> <u>45263</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$19,355.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.147</div> Nonpriority creditor's name and mailing address <u>TricorBraun</u> <u>PO Box 745628</u> <u>Atlanta</u> <u>GA</u> <u>30374</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$19,375.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.148</div> Nonpriority creditor's name and mailing address <u>Trinidad Benham Corp</u> <u>3091 Solution Center</u> <u>Chicago</u> <u>IL</u> <u>60677</u> Date or dates debt was incurred <u>2022 - 2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$8,658.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 2: Additional Page

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Amount of claim

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| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.149</div> Nonpriority creditor's name and mailing address <u>Uline</u> <u>PO Box 88741</u> <u>Chicago</u> <u>IL</u> <u>60680</u> Date or dates debt was incurred <u>2022 - 2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$7,867.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.150</div> Nonpriority creditor's name and mailing address <u>Univar</u> <u>62190 Collections Center Dr</u> <u>Chicago</u> <u>IL</u> <u>60693</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$17,734.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.151</div> Nonpriority creditor's name and mailing address <u>Urchell Laboratories</u> <u>75 Remittance Dr</u> <u>Dept 1657</u> <u>Chicago</u> <u>IL</u> <u>60675</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$3,483.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.152</div> Nonpriority creditor's name and mailing address <u>Valdez Corporation</u> <u>13951 Senlac Dr</u> <u>Suite 100</u> <u>Dallas</u> <u>TX</u> <u>75234</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$1,652.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 2: Additional Page

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Amount of claim

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|---|--|---------------------|
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.153</div> Nonpriority creditor's name and mailing address <u>Veritiv Operating Company</u> <u>dba All American Containers</u> <u>9330 NW 110th Ave</u> <u>Miami</u> <u>FL</u> <u>33178</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$126,262.00</u> |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.154</div> Nonpriority creditor's name and mailing address <u>Versacor</u> <u>PO Box 93809</u> <u>Southlake</u> <u>TX</u> <u>76092</u> Date or dates debt was incurred <u>2022 - 2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$19,914.00</u> |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.155</div> Nonpriority creditor's name and mailing address <u>Waste Management</u> <u>PO Box 660345</u> <u>Dallas</u> <u>TX</u> <u>75266</u> Date or dates debt was incurred <u>2022 - 2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$18,837.00</u> |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.156</div> Nonpriority creditor's name and mailing address <u>Wayne Automation Corporation</u> <u>605 General Washington Ave</u> <u>Norristown</u> <u>PA</u> <u>19403</u> Date or dates debt was incurred <u>2021</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <u>\$9,207.00</u> |

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

| | |
|--|---|
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.157</div> Nonpriority creditor's name and mailing address <u>Whitman-Kiparski, Patricia</u> <u>9506 Eastern Sky Lane</u> <u>Richmond</u> <u>TX</u> <u>77406</u> Date or dates debt was incurred <u>2022 - 2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$56,536.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.158</div> Nonpriority creditor's name and mailing address <u>WM Recycle America</u> <u>PO Box 73356</u> <u>Chicago</u> <u>IL</u> <u>60673</u> Date or dates debt was incurred <u>2022</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$37,494.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.159</div> Nonpriority creditor's name and mailing address <u>Worldwide Express</u> <u>PO Box 21272</u> <u>New York</u> <u>NY</u> <u>10087</u> Date or dates debt was incurred <u>2022 - 2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$20,443.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.160</div> Nonpriority creditor's name and mailing address <u>Zep Sales and Service</u> <u>PO Box 841508</u> <u>Dallas</u> <u>TX</u> <u>75284</u> Date or dates debt was incurred <u>2023</u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> | As of the petition filing date, the claim is: <u>\$30,763.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods & Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |

Debtor Riba Foods, Inc.

Case number (if known) _____

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

| | Name and mailing address | On which line in Part 1 or Part 2 is the related creditor (if any) listed? | Last 4 digits of account number, if any |
|-----|---|--|---|
| 4.1 | <u>American Arbitration Association</u> <u>Ingenuneal Gray</u> <u>9 Greenway Plaza # 1275</u> <u>Houston TX 77046</u> <u>AAA Case 01-23-0001-0363</u> | Line _____ <input checked="" type="checkbox"/> Not listed. Explain: Notice Only | ____ _ |
| 4.2 | <u>Internal Revenue Service</u> <u>300 E 8th Street</u> <u>M/S 5026 AUS</u> <u>Austin TX 78701</u> | Line _____ <input checked="" type="checkbox"/> Not listed. Explain: Notice Only | ____ _ |
| 4.3 | <u>Internal Revenue Service</u> <u>Centralized Insolvency Operation</u> <u>Post Office Box 7346</u> <u>Philadelphia PA 19101-7346</u> | Line _____ <input checked="" type="checkbox"/> Not listed. Explain: Notice Only | ____ _ |
| 4.4 | <u>United States Attorney General</u> <u>950 Pennsylvania Avenue, NW</u> <u>Washington DC 20530-0001</u> | Line _____ <input checked="" type="checkbox"/> Not listed. Explain: Notice Only | ____ _ |
| 4.5 | <u>United States Attorney's Office</u> <u>Civil Process Clerk</u> <u>1000 Louisiana Street</u> <u>Ste 2300</u> <u>Houston TX 77002</u> | Line _____ <input checked="" type="checkbox"/> Not listed. Explain: Notice Only | ____ _ |
| 4.6 | <u>William K. Grubb</u> <u>McGinnis Lochridge</u> <u>609 Main St. # 2800</u> <u>Houston TX 77002</u> <u>Attorney for Food Design Group</u> | Line _____ <input checked="" type="checkbox"/> Not listed. Explain: Notice Only | ____ _ |

Debtor Riba Foods, Inc. Case number (if known) _____**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

Total of claim amounts

5a. Total claims from Part 1 5a. \$0.005b. Total claims from Part 2 5b. + \$4,209,798.125c. Total of Parts 1 and 2 5c. \$4,209,798.12
Lines 5a + 5b = 5c.

Fill in this information to identify the case:Debtor name Riba Foods, Inc.United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXASCase number _____ Chapter 11
(if known)☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

- ☐ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
- ☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

| | | | |
|-----|---|--|--|
| 2.1 | State what the contract or lease is for and the nature of the debtor's interest | Packaging Equipment Other Lease contract no. 097-0117452-000 36 month term; 5 months remaining | First Citizens Bank & Trust Co 21146 Network Place |
| | State the term remaining | <u>5 months</u> | |
| | List the contract number of any government contract | | Chicago IL 60673-1211 |
| 2.2 | State what the contract or lease is for and the nature of the debtor's interest | Steam Generator lease contract no. 097-0121038-000 36 month term; 8 months remaining | First Citizens Bank & Trust Co. 21146 Network Place |
| | State the term remaining | <u>8 months</u> | |
| | List the contract number of any government contract | | Chicago IL 60673-1211 |
| 2.3 | State what the contract or lease is for and the nature of the debtor's interest | 2 Color Copiers Contract no. 900-0327341-000 60 month term; 42 months remaining | First Citizens Bank & Trust Co. 21146 Network Place |
| | State the term remaining | <u>42 months</u> | |
| | List the contract number of any government contract | | Chicago IL 60673-1211 |
| 2.4 | State what the contract or lease is for and the nature of the debtor's interest | Lease contract (1st lease) 3701 - 3703 Arc 3735 - 3737 Arc 3702 - 370_ Artdale 3718 - 3724 Artdale 56 months; expires 3/31/2027 | Kagan Properties Venture I, LTD 8801 Knight Road |
| | State the term remaining | | Houston TX 77056 |
| | List the contract number of any government contract | | |

Debtor Riba Foods, Inc.

Case number (if known) _____

Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

| | | | |
|-----|---|---|---|
| 2.5 | State what the contract or lease is for and the nature of the debtor's interest | Lease (2nd lease) 3810 - 3814 Ace 56 months; expires 3/31/2027 | Kagan Properties Venture I, LTD 8801 Knight Road |
| | State the term remaining | | |
| | List the contract number of any government contract | | Houston TX 77056 |
| 2.6 | State what the contract or lease is for and the nature of the debtor's interest | Lease (3rd lease) 3806 Ace 56 months; expires 3/31/2027 | Kagan Properties Venture I, LTD 8801 Knight Road |
| | State the term remaining | | |
| | List the contract number of any government contract | | Houston TX 77056 |
| 2.7 | State what the contract or lease is for and the nature of the debtor's interest | Penske Truck VLSA 48 month term; 34 months remaining | Penske Truck & Leasing Co., LP 2675 Morgantown Road |
| | State the term remaining | 34 months | |
| | List the contract number of any government contract | | Reading PA 19607 |
| 2.8 | State what the contract or lease is for and the nature of the debtor's interest | Shuttleworth Conveyors Agreement no. 600-0166794-000 60 month term; 33 months remaining | U.S. Bank Marshall Equipment Finance Operations Attn: Terrica A. Vorvick 1310 Madrid St. |
| | State the term remaining | 33 months | |
| | List the contract number of any government contract | | Marshall MN 56258 |

Fill in this information to identify the case:

Debtor name Riba Foods, Inc.

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXAS

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206H

Schedule H: Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Does the debtor have any codebtors?

- ☒ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- ☐ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, *Schedules D-G*. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

*Column 1: Codebtor**Column 2: Creditor*

Name

Mailing address

Name

Check all schedules that apply:

Fill in this information to identify the case:Debtor Name Riba Foods, Inc.United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXAS

Case number (if known): _____

☐ Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets**1. Schedule A/B: Assets--Real and Personal Property** (Official Form 206A/B)**1a. Real property:**

Copy line 88 from Schedule A/B.....

\$0.00**1b. Total personal property:**

Copy line 91A from Schedule A/B.....

\$3,665,293.23**1c. Total of all property**

Copy line 92 from Schedule A/B.....

\$3,665,293.23**Part 2: Summary of Liabilities****2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, Amount of claim, from line 3 of Schedule D.....

\$5,266,554.87**3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**

Copy the total claims from Part 1 from line 5a of Schedule E/F.....

\$0.00**3b. Total amount of claims of nonpriority amount of unsecured claims:**

Copy the total of the amount of claims from Part 2 from line 5b of Schedule E/F.....

+ \$4,209,798.12**4. Total liabilities**

Lines 2 + 3a + 3b.....

\$9,476,352.99

Fill in this information to identify the case and this filing:

Debtor Name Riba Foods, Inc.

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXAS

Case number _____
(if known)

Official Form 202**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets--Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *A Summary of Assets and Liabilities for Non-Individuals* (Official Form 206-Summary)
- ☐ Amended Schedule _____
- ☒ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 06/20/2023
MM / DD / YYYY

X /s/ Miguel A. Barrios
Signature of individual signing on behalf of debtor

Miguel A. Barrios
Printed name

CEO
Position or relationship to debtor

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
VICTORIA DIVISION**

IN RE:
Riba Foods, Inc.

Debtor(s)

§
§
§
§
§

Case No. _____

Chapter 11

**DECLARATION FOR ELECTRONIC FILING OF BANKRUPTCY
PETITION, LISTS, STATEMENTS, AND SCHEDULES**

PART I: DECLARATION OF PETITIONER:

As an individual debtor in this case, or as the individual authorized to act on behalf of the corporation, partnership, or limited liability company seeking bankruptcy relief in this case, I hereby request relief as, or on behalf of, the debtor in accordance with the chapter of title 11, United States Code, specified in the petition to be filed electronically in this case. I have read the information provided in the petition, lists, statements, and schedules to be filed electronically in this case and I HEREBY DECLARE UNDER PENALTY OF PERJURY that the information provided therein, as well as the social security information disclosed in this document, is true and correct. I understand that this Declaration is to be filed with the Bankruptcy Court within five (5) business days after the petition, lists, statements, and schedules have been filed electronically. I understand that a failure to file the signed original of this Declaration will result in the dismissal of my case.

☐ *[Only include for Chapter 7 individual petitioners whose debts are primarily consumer debts] --*
I am an individual whose debts are primarily consumer debts and who has chosen to file under chapter 7. I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each chapter, and choose to proceed under chapter 7.

☒ *[Only include if petitioner is a corporation, partnership or limited liability company] --*
I hereby further declare under penalty of perjury that I have been authorized to file the petition, lists, statements, and schedules on behalf of the debtor in this case.

Date: 6/20/2023 /s/ Miguel A. Barrios
Miguel A. Barrios
CEO
Complete EIN: 76-0239129

PART II: DECLARATION OF ATTORNEY:

I declare UNDER PENALTY OF PERJURY that: (1) I will give the debtor(s) a copy of all documents referenced by Part I herein which are filed with the United States Bankruptcy Court; and (2) I have informed the debtor(s), if an individual with primarily consumer debts, that he or she may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter.

Date: 6/20/2023

/s/ Richard Lee Fuqua II
Richard Lee Fuqua II, Attorney for Debtor

B2030 (Form 2030) (12/15)

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
VICTORIA DIVISION**

In re **Riba Foods, Inc.**

Case No. _____

Chapter 11

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

| | |
|---|----------------------|
| For legal services, I have agreed to accept.....Hourly: Estimated Total | <u>\$0.00</u> |
| Prior to the filing of this statement I have received..... | <u>\$25,000.00</u> |
| Balance Due.....Hourly: Approximately | <u>(\$25,000.00)</u> |

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify)

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;

b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;

c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

06/20/2023

Date

/s/ Richard Lee Fuqua II

Richard Lee Fuqua II
Fuqua & Associates, P.C.
8558 Katy Freeway
Suite 119
Houston, Texas 77024
Phone: (713) 960-0277 / Fax: (713) 960-1064

Bar No. 07552300

/s/ Miguel A. Barrios

Miguel A. Barrios
CEO

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
VICTORIA DIVISION**

IN RE:
Riba Foods, Inc.

CHAPTER 11

DEBTOR(S)

CASE NO

LIST OF EQUITY SECURITY HOLDERS

| Registered Name of Holder of Security Last Known Address or Place of Business | Class of Security | Number Registered | Kind of Interest Registered |
|--|-------------------|-------------------|--------------------------------|
|--|-------------------|-------------------|--------------------------------|

Miguel A. Barrios
2406 Morning Park Drive
Katy TX 77494

Common Stock

**DECLARATION UNDER PENALTY OF PERJURY
ON BEHALF OF A CORPORATION OR PARTNERSHIP**

I, the CEO of the Corporation
named as the debtor in this case, declare under penalty of perjury that I have read the foregoing list and that it is true and correct to the best of my information and belief.

Date: 6/20/2023

Signature: /s/ Miguel A. Barrios
Miguel A. Barrios
CEO